

November 2000

A SALUTE TO  
School Board Members



School Health Connections

School Health Connections is an interdepartmental program between the California Department of Health Services and the California Department of Education dedicated to improving the health and academic success of children and youth. This is accomplished through a coordinated school health system that combines health education, health promotion, disease prevention, and access to health-related services in an integrated manner.

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Outreach

in Action

CONNECTING KIDS TO HEALTH CARE

## SCHOOL BOARD MEMBERS SPEAK OUT

SUE BRAUN

SAN DIEGO UNIFIED SCHOOL DISTRICT

"As a social worker by profession and married to a physician, I am involved in both mental and physical health. I am a very strong believer in early intervention," says Sue Braun, who has served on the San Diego Unified School District (SDUSD) School Board for almost 12 years. SDUSD has some 142,000 students.

Braun's belief stems from her own life. It wasn't until she was in eighth grade, after an academic history of low achievement and failing grades, that her acute need for glasses was discovered. Once Braun received the vision care she needed, "I went from a C/D student to an A/B student overnight," she enthuses.

This has solidified her strong commitment to preventive health. "It is only when children are healthy that they are in school on a daily basis ready to achieve academically. You have to be serious about reducing absenteeism."

Braun is convinced that families must have health insurance to receive appropriate health care, especially preventive services. "Without insurance, children are seen by a doctor only when an illness or emergency occurs. With preventive care, we're talking about finding day in and day out things that prevent children from learning—like my eyesight problem."

Braun has tremendous pride in the cooperative efforts of SDUSD to bring health insurance to each and

every young person. "We take health care seriously here," she says. "The community and school work together. We aren't into 'turf wars.' We stress communication between school nurses and community health care providers."

**"If school board members are serious about academic achievement, they have to support outreach for health insurance."**

—Sue Braun  
School Board Member  
San Diego U.S.D.

supporting low-cost and free health care coverage for children? Braun has an answer: "It makes a statement to school staff and to the community that health care coverage is necessary and important."

JAMES McDONALD

PITTSBURG UNIFIED SCHOOL DISTRICT

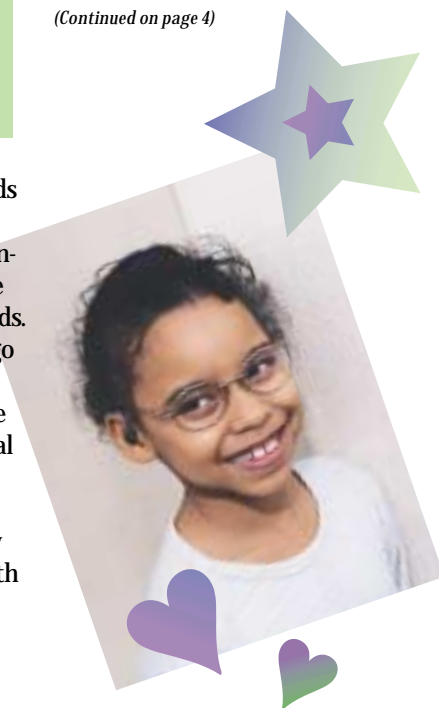
James MacDonald is a three-year member of the Pittsburg Unified School District (PUSD) School Board. Located in the San Francisco Bay Area, the district has about 9,000 students, 67% of whom are low-income. "We need to be more aggressive in educating families about health care coverage," says MacDonald. "We have so many kids who are eligible for low-cost or free health insurance but have not been enrolled."

(Continued on page 4)

Braun feels that school staff needs to know that the school board is behind them. The board needs to encourage efforts to make health care coverage a reality for uninsured kids.

In early September, the San Diego Board of Education passed a resolution offering support for the Healthy Families Program, Medi-Cal for Children and other affordable health care programs "in order to provide optimal learning for every child by addressing children's health problems and maximizing school attendance."

What is the value of a school board resolution and policy



## **SAN DIEGO COUNTY: A BUNDLE OF HEALTH**

***"A single twig  
is weak, but a  
bundle of twigs  
is strong"***

**—Tecumseh,  
Shawnee Indian  
Proverb**

Tecumseh's words are reflected in the massive health care coverage outreach movement in San Diego County that is targeting children. "The most exciting thing about the

San Diego Kids Health Assurance Network (SD-KHAN) is the building of partnerships and relationships to find ways to provide medical and dental coverage for all children living in San Diego County," says Ana Gonzalez, program specialist with SD-KHAN.

Over 60 collaborative partners, representing local community-based organizations, hospitals, government agencies, health plans, faith entities, businesses and school districts, have joined together under the SD-KHAN banner. The mission is to find ways to provide medical and dental coverage for all children of San Diego County. SD-KHAN allows the community to share ideas to ensure that efforts aren't duplicated and reinforces the "we're in this together" concept.

One way that SD-KHAN works to get health care coverage to children is through school outreach. Two active partners in school outreach are HealthLink and Health-insurance Access Through Schools (HATS).

### **SAN DIEGO UNIFIED SCHOOL DISTRICT LINKING TO HEALTH**

HealthLink is a partnership operating within the San Diego Unified School District (SDUSD) that brings community-based organizations into schools to inform parents about health care coverage.

SDUSD is the second largest school district in California and one of the ten largest in the nation. Out of the 142,000 SDUSD students, 70% of students are on the Free and Reduced Price Meals Program.

Jack Campana, SDUSD director of health and intervention services, says that a concept like HealthLink requires commitment from school leadership. "Think of the power of sending letters

from the district superintendent to all school principals asking them to welcome and provide a space for outreach workers on their campus to sign kids up for health care coverage."

Campana says that kind of commitment came from SDUSD superintendent Alan Bersin and the district school board. The Healthy Families Program started in California at about the same time Bersin became superintendent. Ensuring that low-income, uninsured children receive low-cost and free health care coverage became one of his priorities.

One of HealthLink's goals is to provide students with access to affordable health insurance. Campana says that the school district is aware of its responsibility to help link children with health care coverage. "Healthy kids are better learners. That's really clear. I don't know of any institution more integral than the school when it comes to enrolling kids in health insurance programs."

Community partners in San Diego County work in unison with the school district. Health information exchange consent cards are sent to every home asking parents if they would like information about health care coverage for their children. Permission is also requested to release the parent's name to an authorized health insurance enrollment specialist to help parents at no cost. That opens the door for community-based organizations to come on campus and set up information tables at open houses to get this vital information to parents.

***"With health insurance  
enrollment, you need to work  
with schools. Parents see the  
connection between the school  
and well-being of their children."***

**—Jack Campana  
San Diego U.S.D.**

Campana says that the district set a goal in January 1999 to enroll one thousand kids a month. "We're ahead of our goal. Enrollment stands at 20,000 kids as of June 30, 2000."

### **HATS OFF TO HATS**

"Health-insurance Access Through Schools (HATS) is a remarkable program that goes into schools. We don't ask them to do another task but offer to help them. We're not moving them away from their primary mission of academics. The HATS program also functions without using school funds," says Elaine Pizzola, HATS program supervisor.

***"Extensive student  
health care coverage  
results in better  
attendance, higher  
academic achieve-  
ment and a more  
fulfilling school  
experience."***

**—Elaine Pizzola, HATS**

HATS, like HealthLink, conducts outreach to enroll eligible children in health care coverage programs. HATS runs in five San Diego County school districts and has served 42 school sites to date.

Outreach workers set up work spaces

with phones in the schools, often for six to eight weeks depending upon the need of the school.

Funded by the Robert Wood Johnson Foundation, San Diego County and other special interest groups, HATS gives districts money to hire outreach workers.

*(Continued on page 3)*





# MONEY, MONEY, MONEY...

## Has Your District Tapped into These Funding Sources?

### LOCAL EDUCATION AGENCY (LEA) MEDI-CAL BILLING OPTION

The LEA Medi-Cal Billing Option allows local education agencies (LEAs) to receive reimbursement for certain school-based services such as assessments, treatments and therapy, and specialized transportation provided to students enrolled in Medi-Cal. These reimbursements can then be used to help pay for school-linked services for students and families, including Medi-Cal outreach efforts. The decisions on reinvestment are made by a school/community collaborative.

For more information or to participate in this program, contact the California Department of Health Services, Provider Enrollment Unit, at (916) 324-7882. Information can also be obtained through the Web at <http://www.leamedi-calta.org> or by contacting your local LEA Technical Assistance (TA) Project:

**NORTHERN TA CENTER**  
Santa Clara County Office of Education  
(408) 453-6877

**SOUTHERN TA CENTER**  
San Bernardino County  
Superintendent of Schools  
(909) 387-4812

**LOS ANGELES COUNTY TA CENTER**  
Los Angeles County Office of Education  
(562) 922-6377

### MEDI-CAL ADMINISTRATIVE ACTIVITIES (MAA)

A district or school that provides information to or helps enroll a family in Medi-Cal can receive reimbursement through the State's MAA program. Activities that are claimable include outreach, facilitating the Medi-Cal application, transportation, program planning and policy development, MAA coordination and training and contracting for Medi-Cal services. In order to claim reimbursement under MAA, districts/schools should contact their Local Educational Consortium (LEC). A district must enroll in the MAA program through their LEC. An individual school cannot. For more information or to obtain the phone number of your district's LEC MAA coordinator, contact Pat Morrison, California Department of Health Services' Medi-Cal Benefits Branch, at (916) 654-0128.

### HEALTHY FAMILIES/MEDI-CAL FOR CHILDREN (HF/MCC) ENROLLMENT ENTITIES (EE) AND CERTIFIED APPLICATION ASSISTANTS (CAA)

Districts/schools that want to be reimbursed for helping families apply for HF/MCC may apply to become an EE and send designated staff to be trained as CAAs. CAAs can earn \$50 for their school district for every family enrolled in HF/MCC. To learn more about becoming an EE or to sign up for free CAA training, call the state's training subcontractor at 1-888-237-6248.

### HEALTHY START GRANTS

The California Department of Education's (CDE) Healthy Start program links children and families to services that support school readiness, academic success, physical and mental health and family functioning. CDE offers planning and operational grants to local education agencies and their collaborative partners to provide school-linked integrated services. In many Healthy Start schools these services include Healthy Families/Medi-Cal for Children outreach efforts.

A Request for Application (RFA) is available beginning November 1, 2000. The application submission deadline is March 1, 2001.

For more information, visit CDE's Web site at [www.cde.ca.gov](http://www.cde.ca.gov), and then click on the Healthy Start link or call the Healthy Start and After Schools Office at (916) 657-3558.

### KAISER MINI-GRANTS

Kaiser Permanente Cares for Kids (KPCK) provides low-cost health care coverage for children not eligible for Healthy Families/Medi-Cal for Children. KPCK offers funding to agencies/schools to provide families with free information and enrollment assistance on all available health coverage programs, including KPCK's Child Health Plan. For more information, contact Luis Pardo at (510) 987-2589 or by e-mail at [luis.pardo@kp.org](mailto:luis.pardo@kp.org).

### SCHOOL HEALTH FINANCE DATABASE

Log on to this Web site for information on federal, foundation, and state-specific funding sources for general school health programs: <http://www2.cdc.gov/nccdphp/shfp/index.asp>.

(SAN DIEGO COUNTY: A BUNDLE..." Continued from page 2)

HATS outreach workers meet parents at school. The key is being where the parents can find the help they need. In one school, many parents walk their kids to school, then stay around and socialize. The outreach worker makes it a point to "hang out" with them. In another school, where parents drive their children to school, the worker is in the parking lot saying, "Hi" to parents. Special school events are also opportunities to meet parents.

Many outreach workers have portable files on wheels and go where there is space on a given day. At one site, the principal was so supportive that when space was tight, he offered workers his office to use for application assistance appointments.

### A BUNDLE OF TWIGS

Tecumseh's concept of many twigs forming a powerful bundle holds true in San Diego County. The dedicated efforts to enroll children in health care coverage are reflected in the county's strong coalition of community and school. "That is what continues to build trust, sustain partnerships and build close relationships," says Ana Gonzalez.



MacDonald believes strongly that a school board has to take a leadership role in making parents aware of available health insurance.

***"A school board answers to parents. Our parents have concerns about health care coverage."***

**—James McDonald**  
School Board Member  
Pittsburg U.S.D.

Pittsburg Unified School District has taken extraordinary steps to reach parents with health care coverage enrollment information. Under district letterhead, a form, in both English and Spanish, has been sent to every parent with children enrolled in district schools asking whether or not they would like information on low-cost or free health care coverage. What sets PUSD apart is that return of the form is mandatory.

MacDonald says that parents need to be exposed to research showing the strong correlation between student health and academic performance. "It is also important that we support our staff. Our staff know their jobs. We give them a lot of leeway in addressing health issues, such as access to health care coverage."

### **FELIX ALVAREZ**

**ALUM ROCK UNION ELEMENTARY  
SCHOOL DISTRICT**

"School is a perfect setting to approach parents about health care coverage for

their children," says Felix Alvarez, an eight-year Alum Rock Union Elementary School District School Board member. Alum Rock District, located in eastern San Jose, has approximately 16,000 students.

"At Alum Rock School District we know that meeting the health needs of our students is the first important step toward realizing our goal of academic achievement," maintains Alvarez.

***"Healthy children make better learners. Education is for all children and so is access to health care."***

**—Felix Alvarez**  
School Board Member  
Alum Rock Union E.S.D.

The Alum Rock District School Board's support of schools' involvement in health care coverage has resulted in strong outreach efforts. "We organized our first school enrollment event in January 1999 in collaboration with the local health plan in Santa Clara County. We enrolled 489 children in a six-hour period."

The Board further showed their support of health insurance outreach for the young people in their district by passing the California School Boards Association's sample policy and guidelines on affordable health care coverage.

Energized by the success of the first event, the Alum Rock District School Board has placed affordable health care coverage outreach as a high priority.

## **SCHOOL BOARD MEMBERS: SHOW YOUR SUPPORT!**

***Adopt CSBA's sample school board policy and resolution on affordable health care coverage!***

***For a copy, call Martin Gonzalez, CSBA, at 916/371-4691 or visit CSBA's Web site, [www.csba.org](http://www.csba.org), under the CSBA Hot Links, Healthy Families Update***

"We received a grant from the California Department of Health Services to conduct outreach. We worked heavily with the Even Start program, which already had a strong rapport with parents in the community. We even trained several of the Even Start parent/community liaisons as Certified Application Assistants (CAAs) to help parents enroll their children."

Since then, the Alum Rock District has hired its own Healthy Families coordinator. The district has also reached out to neighboring school districts. "Why duplicate efforts in each district when we can work with other school districts on similar outreach activities?" questions Alvarez.

Alvarez also believes strongly in follow-up with families. "The first step is to provide families with information. The second step is to enroll their children. The third step is to make sure that families know how to use the benefits."



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Director  
Department of  
Health Services

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Health Educator

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Administrative Assistant

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# HEALTH CARE COVERAGE FOR CHILDREN

Regular health care is important for a child's well being and physical development. Here are a few programs that provide low-cost or free health care coverage for children:



## **MEDI-CAL FOR CHILDREN**

Medi-Cal for Children provides no-cost comprehensive medical, dental and vision care coverage for children and pregnant women.\* Eligibility is determined by family size, children's ages and family income. This program is available to eligible U.S. citizens, nationals or immigrants. For a mail-in application, call toll-free 1-888-747-1222.

\*Families whose income is higher than the allowable limits for no-cost Medi-Cal for Children will have a share of cost (similar to a monthly deductible) based on their income and family size.



## **HEALTHY FAMILIES**

Healthy Families provides low-cost medical, dental and vision care coverage for children who are not eligible for no-cost Medi-Cal for Children. Monthly premiums are \$4 to \$9 per month with a maximum of \$27 per family. Eligibility is determined by family size, children's ages and family income. This program is available to U.S. citizens, U.S. nationals and "qualified" immigrant children under age 19. For more information and to request a mail-in application, call toll-free 1-888-747-1222.



## **CALIFORNIAKIDS**

CaliforniaKids provides affordable preventive and primary health, dental, vision and behavioral health coverage for undocumented children. For more information, call 1-818-461-1400.

(Not affiliated with or endorsed by the State of California.)



## **ACCESS FOR INFANTS AND MOTHERS**

Access for Infants and Mothers (AIM) provides health insurance for uninsured pregnant women and their newborns up to age 2. To qualify, women must be less than 30 weeks pregnant, a California resident for at least 6 months, not eligible for no-cost Medi-Cal, uninsured, and have an income within AIM guidelines. Women with a separate maternity deductible or co-payment over \$500 may also qualify. For more information, call toll-free 1-800-433-2611.

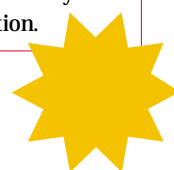


## **KAISER PERMANENTE CARES FOR KIDS CHILD HEALTH PLAN**

Kaiser Permanente Cares for Kids Child Health Plan provides low-cost health care coverage for uninsured children who are not eligible for no-cost Medi-Cal for Children or low-cost Healthy Families. This program covers children under age 19 who live within Kaiser Permanente's California service area. The cost is \$35 per child per month. Eligibility is based on family size and income. For more information, call toll-free 1-800-255-5053.

(Not affiliated with or endorsed by the State of California.)


Please see the reverse side for income levels for each program. If family size (number of persons in family) exceeds the family size shown, please call the program(s) for more information.



# MONTHLY INCOME LEVELS

Effective April 1, 2000–March 31, 2001


## MEDI-CAL FOR CHILDREN



NUMBER OF PERSONS IN FAMILY	PREGNANT WOMEN AND CHILDREN TO AGE 1	CHILDREN AGE 1 THRU 5	CHILDREN AGE 6 THRU 18
1	\$0–\$1,392	\$0–\$926	\$0–\$696
2*	\$0–\$1,875	\$0–\$1,247	\$0–\$938
3	\$0–\$2,359	\$0–\$1,569	\$0–\$1,180
4	\$0–\$2,842	\$0–\$1,890	\$0–\$1,421
5	\$0–\$3,325	\$0–\$2,212	\$0–\$1,663
6	\$0–\$3,809	\$0–\$2,533	\$0–\$1,905

\*A pregnant woman is considered a family of two for purposes of this chart.


## HEALTHY FAMILIES



NUMBER OF PERSONS IN FAMILY	CHILDREN BIRTH THRU AGE 1	CHILDREN AGE 1 THRU 5	CHILDREN AGE 6 THRU 18
1	\$1,393–\$1,740	\$927–\$1,740	\$697–\$1,740
2*	\$1,876–\$2,344	\$1,248–\$2,344	\$939–\$2,344
3	\$2,360–\$2,948	\$1,570–\$2,948	\$1,181–\$2,948
4	\$2,843–\$3,553	\$1,891–\$3,553	\$1,422–\$3,553
5	\$3,326–\$4,157	\$2,213–\$4,157	\$1,664–\$4,157
6	\$3,810–\$4,761	\$2,534–\$4,761	\$1,906–\$4,761

\*A pregnant woman is considered a family of two for purposes of this chart.

## ACCESS FOR INFANTS AND MOTHERS




NUMBER OF PERSONS IN FAMILY	GROSS FAMILY INCOME (ANNUAL INCOME)	YOUR TOTAL COST FOR PREGNANCY AND BABY'S FIRST YEAR
2*	\$22,500–\$33,750	\$450–\$675
3	\$28,300–\$42,450	\$566–\$849
4	\$34,100–\$51,150	\$682–\$1,023
5	\$39,900–\$59,850	\$798–\$1,197
6	\$45,700–\$68,550	\$914–\$1,371
7	\$51,500–\$77,250	\$1,030–\$1,545
8	\$57,300–\$85,950	\$1,146–\$1,719


\*A pregnant woman is considered a family of two for purposes of this chart.

## KAISER PERMANENTE CARES FOR KIDS CHILD HEALTH PLAN

### CALIFORNIAKIDS



NUMBER OF PERSONS IN FAMILY	GROSS MONTHLY COUNTABLE INCOME
1	\$0–\$1,740
2	\$0–\$2,344
3	\$0–\$2,948
4	\$0–\$3,553
5	\$0–\$4,157
6	\$0–\$4,761



NUMBER OF PERSONS IN FAMILY	GROSS MONTHLY COUNTABLE INCOME
1	\$1,741–\$2,088
2	\$2,345–\$2,813
3	\$2,949–\$3,538
4	\$3,554–\$4,263
5	\$4,158–\$4,988
6	\$4,762–\$5,713